PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

CLAIMS AS FILED - PART I

Application or Docket Number

10/611/630

CLAIMS AS FILED - PART I							SMALL ENTITY			OTHER THAN		
TOTAL CLAIMS			(Column	1)	(COIUI	(Column 2)		TYPE _		OR 1 r	SMALL	
								RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			35 minus 20=		* 15			X\$ 9=		OR	X\$18=	2H v
INDEPENDENT CLAIMS			3 minus 3 =		×			X42=		OR	X84=	
MU	LTIPLE DEPEN	IDENT CLAIM PF	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is I	less than ze	ro, enter	r "0" in c	olumn 2	L	TOTAL		OR	TOTAL	10208
CLAIMS AS AMENDED - PART II										-	OTHER	THAN
		(Column 1)		(Colur		(Column 3)	SMALL E		OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	-01 4::-	=	1	X42=		OR	X84=	
Ц	FIRST PRESE	NTATION OF MU	OLTIPLE DEI	-ENDEN!	CLAIM		۱	+140=		OR	+280=	
							L	TOTAL		4 '	TOTAL	
		10 ·		, -			#	ADDIT. FEE	L	OR	ADDIT. FEE	
	<u> </u>	(Column 1) CLAIMS		(Colur		(Column 3)	1 -			1 -		
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	1	X42=		OR	X84=	
Ĺ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						1 †	140			1200	
								+140=		OR	+280=	
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
_		(Column 1)		(Colur		(Column 3)	1					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=	 	X42=		1	X84=	<u> </u>
lacksquare	FIRST PRESE	NTATION OF MI	ULTIPLE DEI	PENDEN	T CLAIM		1 }	\\76 =		OR	704=	
	if the and it				- 40 n	huma C		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."										OR	TOTAL ADDIT. FEE	
		umber Previously Pa							aronriate box	-		